

04/12/01

JC984 U.S. PTO

04-13-01

A

Please type a plus sign (+) inside this box → ☐PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 6696.US.02  
First Inventor or Application Identifier Michael R. Schrimpf  
Title DIAZABICYCLIC CENTRAL NERVOUS SYSTEM ACTIVE AGENTS  
Express Mail Label No. EL507389955US**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages 194]  
(preferred arrangement set forth below)
- Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets ☐
4. ☐ Oath or Declaration [Total Pages ☐
- a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13. ☐ \* Small Entity ☐ Statement filed in prior application  
Statement(s) Status still proper and desired  
(PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15. ☒ Other: Declaration and Power of  
Attorney (Unexecuted)

\* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY  
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT  
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_ / \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name	Steven F. Weinstock				
	Abbott Laboratories				
Address	Department 377/AP6D-2				
	100 Abbott Park Road				
City	Abbott Park	State	IL	Zip Code	60064-6050
Country		Telephone	(847) 937-4559	Fax	(847) 938-2623

Name (Print/Type)	Daniel W. Collins	Registration No. (Attorney/Agent)	31,912
Signature	[Signature]		Date
			April 12, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**  
**for FY 1999**Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.**TOTAL AMOUNT OF PAYMENT** (\$1772.00)**Complete if Known**

Application Number	
Filing Date	April 12, 2001
First Named Inventor	Michael R. Schrimpf
Examiner Name	
Group / Art Unit	
Attorney Docket No.	6696.US.02

**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number	01-0025
Deposit Account Name	ABBOTT LABORATORIES

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- 2.
- ☐
- Payment Enclosed:
- 
- ☐
- Check
- ☐
- Money Order
- ☐
- Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
101 760 201 380		Utility filing fee	710.00
106 310 206 155		Design filing fee	
107 480 207 240		Plant filing fee	
108 760 208 380		Reissue filing fee	
114 150 214 75		Provisional filing fee	

**SUBTOTAL (1)** (\$ 710.00)**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
79	-20** = 59	18.00	1062.00
Independent Claims	1 -3** = 0		0.00
Multiple Dependent			0.00

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee Description
103 18 203 9		Claims in excess of 20
102 78 202 39		Independent claims in excess of 3
104 260 204 130		Multiple dependent claim, if not paid
109 78 209 39		** Reissue independent claims over original patent
110 18 210 9		** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ 1062.00)**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
105 130 205 65		Surcharge - late filing fee or oath	0.00
127 50 227 25		Surcharge - late provisional filing fee or cover sheet.	0.00
139 130 139 130		Non-English specification	0.00
147 2,520 147 2,520		For filing a request for reexamination	0.00
112 920* 112 920*		Requesting publication of SIR prior to Examiner action	0.00
113 1,840* 113 1,840*		Requesting publication of SIR after Examiner action	0.00
115 110 215 55		Extension for reply within first month	0.00
116 380 216 190		Extension for reply within second month	0.00
117 870 217 435		Extension for reply within third month	0.00
118 1,360 218 680		Extension for reply within fourth month	0.00
128 1,850 228 925		Extension for reply within fifth month	0.00
119 300 219 150		Notice of Appeal	0.00
120 300 220 150		Filing a brief in support of an appeal	0.00
121 260 221 130		Request for oral hearing	0.00
138 1,510 138 1,510		Petition to institute a public use proceeding	0.00
140 110 240 55		Petition to revive - unavoidable	0.00
141 1,210 241 605		Petition to revive - unintentional	0.00
142 1,210 242 605		Utility issue fee (or reissue)	0.00
143 430 243 215		Design issue fee	0.00
144 580 244 290		Plant issue fee	0.00
122 130 122 130		Petitions to the Commissioner	0.00
123 50 123 50		Petitions related to provisional applications	0.00
126 240 126 240		Submission of Information Disclosure Stmt	0.00
581 40 581 40		Recording each patent assignment per property (times number of properties)	0.00
146 760 246 380		Filing a submission after final rejection (37 CFR 1.129(a))	0.00
149 760 249 380		For each additional invention to be examined (37 CFR 1.129(b))	0.00
Other fee (specify) _____			0.00
Other fee (specify) _____			0.00

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0.00)**SUBMITTED BY**

Typed or Printed Name: Daniel W. Collins

Signature: 

Date: April 12, 2001

**Complete (if applicable)**

Reg. Number: 31,912

Deposit Account User ID: \_\_\_\_\_

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: M. R. Schrimpff, et al

Serial No.:

Filed: April 12, 2001

Title: DIAZABICYCLIC CENTRAL  
NERVOUS SYSTEM ACTIVE  
AGENTS

Case No.: 6696.US.02

Exrpress Mail Label No.:EL507389955US

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as Express Mail in an envelope addressed to the:

Box Patent Application  
Assistant Commissioner for Patents  
Washington, D.C. 20231, on:

Date of Deposit: April 12, 2001

*Robin S. Evans* 4-12-01  
Robin S. Evans Date

TRANSMITTAL LETTER

Box Patent Application  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Enclosed herewith for the patent application identified above entitled DIAZABICYCLIC CENTRAL NERVOUS SYSTEM ACTIVE AGENTS are the following:

1. Utility Patent Application Transmittal Letter
2. Fee Transmittal - 1 page (in duplicate);
3. Specification (178 Pages);Claims (15 Pages);Abstract(1 Page)
4. Unexecuted Declaration and Power of Attorney (3 Pages)
5. Two Return Receipt Postcards

The Commissioner is hereby authorized to charge any additional Filing Fees required under 37 CFR 1.16, as well as any patent application processing fees under 37 CFR 1.17 associated with this communication for which full payment had not been tendered, to Deposit Account No. 01-0025.

Dated: April 12, 2001

ABBOTT LABORATORIES  
D-0377/AP6D-2  
100 Abbott Park Road  
Abbott Park, IL 60064-6050  
Telephone: (847) 937-4559  
Facsimile: (847) 938-2623

Respectfully submitted,  
M. R. Schrimpff, et al.

*Daniel W. Collins*  
Daniel W. Collins  
Registration No. 31,912  
Attorney for Applicants